By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
	1	Page of			2	N	Page number of number of pages	No	No	No	Used to keep track of collision report page s.
EC01	2	Incident Report	ENV	INCIDENT RPT CDE	1	Α	N - N o (U nch eck ed) Y - Yes (Checked) - requires field 186 > 50	No	No	No	collision report. Used in conjunction with EC36.
2001		moldoni report					N - No (Unchecked)			.,,,	Indicates the investigation is complete at the
EC02	3	Investigation Completed	ENV	INVST_COMPLETE_CDE	1	Α	Y - Yes (Checked)	No	No	No	time the report is made.
											Indication if a law enforcement agen cy
							N - No (Unchecked)				invest igation was made at the scene of the
EC29	4	Investigation Made At Scene	ENV	INVST_AT_SCENE_CDE	1	Α	Y - Yes (Checked)	No	No		collision.
											Indicates whether or not any photographs were taken at the scene of the collision. This applies
							N - No (Unchecked)				only to photographs taken for the purpose of
EC31	5	Photographs	ENV	PHOTOGRAPH_CDE	1	Α	Y - Yes (Checked)	No	No		the investigation.
							N - No (Unchecked)				previous collision report that was already
	6	Revised	ENV	REVISION_CDE	1	Α	Y - Yes (Checked)	No	No	No	turned i n.
											The seve rity of a col lision based on the most
											severe injury to any person involved in the collision. As of January 1, 2001, this includes
											any person who dies within 30 days of the date
							N - No (Unchecked)				of the collision as a result of injuries sustained
EC02	7	Fatality	ENV	COLL_FATALITY_CDE	1	Α	Y - Yes (Checked)	No	No	Yes	from the collision.
							N - No (Unchecked)				Indicates there is a hit and r un vehi cle involved
	8	Hit and Run	ENV	COLL_HIT_RUN_CDE	1	Α	Y - Yes (Checked)	No	No	No	in the collision. Used in conjunction with EC 30. Affiliation of the person completing the collision
EC04	9	Reporting Agency	ENV	REPORT AGENCY NME	30	AN	Name of reporting agency	No	No	No	report.
2001		responding regency		KEI GKI ZXGENG I ZXME		7	rame or reperting agency				Case i dentification number can be used by the
											reporting ag ency. This is not to be confused
											with the D ocum ent Identifier assigned by the
											Department of Public Safety upon receipt of the
EC 05	10	Case Number	ENV	CASE_NUMBER_TXT	10	AN	Case Number	No	No	No	collision report.
											The total num ber of motor vehicles (automobiles, single-unit trucks, truck
							Total num ber of vehi cles involved - Unit Type =				combinations, motorcycle, etc.) involved in the
EC 16	11	Motor Vehicles Involved	ENV	TOT_VEHICLES_NUM	2	N	C or D	CD2	Yes	No	collision.
							Total num ber of injured persons - Injury				The total num ber of persons injured, excluding
EC 18	12	Number Injured	ENV	TOT_INJURED_NUM	2	N	Severity = 2, 3 or 4	CD5	Yes	Yes	fatalities within thirty (30) days, in the col lision.
											The total number of fatalities that occurred
											within thirty (30) days of the collision (motorists
											and non-motorists) that resulted from injuries sustained as the result of a specific motor
											vehicle collision. For purposes of this element
											only, an unborn child that ceases to live as a
											result of a traffic collision, is not to be included
EC 17	13	Number Killed	ENV	TOT_FATALITIES_NUM	2	N	Total number of fatalities - Injury Severity = 5	CD6	Yes	Yes	n the nu mber killed or injured.
EC06	14	Date of Collision	ENV	COLLISION DATE	10	Date	MM/DD/YYYY	C2	Yes	Yes	The da te (month, day, and year) the col lision occur red.
2000		Date of Comeion				Date	If unk nown - 9	02	. 00		occurred.
EC 07	15	Time of Collision	ENV	COL LISION_TIME	5	Time	00:00 = Midnight	C2	Yes	Yes	The time the col lision occu rred.
											The county entity in which the collision
EC 08	16	County Number	ENV	CNTY_NUM	2	N	Appendix A	C3	Yes	Yes	occurred.
EC08	17	County Name	ENV	CNTY_NME	12	AN	Appendix A I - In	C3	Yes	Yes	Indicate whe ther the col lision location is in or
EC 12	18	In/Near	ENV	IN NEAR CITY CDE	1	Α	N - Near - requires fields 21-23 &/or 24-26	No	No	No	near a city/place.
		-	1								Number assigned to each city within each
EC 13	19	City Number	ENV	CITY_NUM	2	N	Appendix B - not required - not all cities in table	C4	Yes	Yes	county
EC 13	20	City Name	ENV	CITY_NME	15	AN	Appendix B - required - not all cities in table	C4	Yes	Yes	
5044	04	Distance from Near est	- N. /	DOT NO EDM OTY NUMBER			Distance If Miles they 000:0		NI.		Distance Nor th or Sout h from near est city or
EC14	21	City/Town (North/South) Distance from Near est	ENV	DST_NS_FRM_CTY_NUM	4	N	Distance - if Miles then 999v9	No	No	No	town
		City/Town (North/South)					F - Feet				
EC 14	22	Feet/Miles	ENV	DST_NS_FRM_CTY_CDE	1	Α	M - Miles	No	No	No	Indicates if distance is in Feet or Miles
		Direction from Near est					N - North				Indicates if direction is North or South of city or
EC 14	23	City/Town (North/South)	ENV	DIR_NS_FRM_CTY_CDE	1	Α	S - South	No	No	No	town

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Compliant		
		Distance from Nearest									Distance East or West from nearest city or
EC14	24	City/Town (East/West)	ENV	DST_EW_FRM_CTY_NUM	4	N	Distance - if Miles then 999v9	No	No	No	town
		Distance from Nearest									
		City/Town (East/West)					F - Feet				
EC 14		Feet/Miles	ENV	DST_EW_FRM_CTY_CDE	1	Α	M - Miles	No	No	No	Indicates if distance is in Feet or Miles
		Direction from Nearest					E - East				Indicates if direction is East or West of city or
EC 14	26	City/Town (East/West)	ENV	DIR_EW_FRM_CTY_CDE	1	A	W - West	No	No	No	town
EC 14	27	Control Number	ENV	CONTROL_NUM	2	N	Number	No	No	No	
EC14		Intersection Identification	ENV	INTERSECT_ID_NUM LOCATION NUM	4	N	Number Number	No No	No No	No	
EC 14		Location East Grid	ENV	EAST GRID NUM	4	N N	Number - 999v9 - units must be odd	No	No	No No	
EC 14		North Grid	ENV	NORTH GRID NUM	4		Number - 999v9 - units must be odd Number - 999v9 - units must be even	No	No No	No	
EC 14		Administrative (ODOT)	EINV	NORTH_GRID_NUM	4	IN	Not entered into database	NO	INO	NO	For ODOT use only (Paper Form Only.
EC 19	32	Administrative (ODOT)					Not entered into database				
											The entire width between the boundary lines of every way publicly maintained when any part
											thereof is open to the use of the public for
EC 09	33	Street, Road or Highway	ENV	STREET HIWAY TXT	30	AN	Highway Name, Number - required	C5	Yes	No	purposes of vehicular travel.
2000	- 00	on oot, moda or mgmay				,	ingina) itamo, itambor roquiro			.,,	The location of the first harmful event as it
											relates to its position within or outside the traffic
							N - N o (U nch eck ed)				way. Use ODOT Oklahoma Designated
EC 10	34	AT	ENV	AT LOCATION CDE	1		Y - Yes (Checked) - requires fields 35-37	C5	Yes	No	Roadway System.
EC 10	35	Distance (from Location)	ENV	DST FRM LOCATN NUM	4	N	Distance - if Miles then 999v9	C5	Yes	No	Distance f rom given I ocation
		Distance (from Locat ion)					F - Feet				
EC10	36	Feet/Miles	ENV	DST_FRM_LOCATN_CDE	1	Α	M - Miles	C5	Yes	No	Indicates if distance is in Feet or Miles
							N - Nor th E - East				
							S - South W - West				
							NE - Nort heast NW - Nor thwest				
EC10	37	Direction (from Location)	ENV	DIR_FRM_LOCATN_CDE	2	Α	SE - Southeast SW - Southwest	C5	Yes	No	Indicates the direction from the given location
											A uni que US DO T/AAR num ber assigned for
											identification pu rposes t o a railroad cr ossing by
											a state highway agency in cooperation with the
											Federal Railroad Administration. The
EC11		(Nearest) Intersecting Street,	ENIX.	INTERCECT DO AD TYT	20	AN	Highway Name Nombay required	C.F.	V	NI.	investigating officer shall record the 7 digit
ECTT	38	Road or Highway	ENV	INTERSECT_ROAD_TXT	30	AN	Highway Name, Number - required	C5	Yes	No	num ber as signed to the crossing.
							Numeric - Contact Unit Alpha - Non-Contact Unit				Units involved in the collision should be listed in
VC 01	39	Unit Number	UNT	UNIT ID	2	AN	Wn - Witness	V1	Yes	No	sequential order (to uniquely identify each unit)
VO01	33	Onit ivanibei	OIVI	ONTI_ID	2	AIN	WIII - WILLIESS	V 1	163	140	The total number of injured and uninjured
											occupants in this motor vehicle involved in the
											collision, including persons in or on the motor
VC 02	40	Occupants	UNT	UNIT OCCUPANT NUM	2	N	Number of occupants in this vehicle.	V9	Yes	No	vehicle at the time of the col lision.
		·					D -Dri ver (vehi cle)				
							P - Pedest rian				
							X - Pedest rian Convey ance				
							B - Bicyclist				
							Z - Other Cyclist				
							C - Park ed C ar (vehi cle)				
							A - Animal				
VC 03	41	Unit Type	UNT	UNIT_TYPE_CDE	1	Α	T - Train	V2	Yes	No	Type of unit involved in the collision.
											Refers to cases where the vehicle, or the driver
											of the vehicle, in transport is a contact vehicle
							N - No (Unchecked)			١	in the collision and departs the sce ne without
VC 34	42	Hit and Run (Vehicle)	UNT	UNIT_HIT_RUN_CDE	1		Y - Yes (Check ed)	V23	Yes	No	stopping to render aid or report the col lision.
\/O.0.1	40	O	LINIT	0407 002			N - No (Unchecked)	1/44			Indicates if the unit is a truck, bus, or
VC 04	43	Commercial Motor Vehicle	UNT	CMV_CDE	1	Α	Y - Yes (Check ed) - requires fields 152-168	V14	Yes	Yes	hazardous material carrier.
											The full name of the individual driver, any
PC 02	44	Person: Last, First, Middle	PER	LAST NME	20	AN	Last Nama	P12	Voc	Yes	injured witness or passenger last name, first name, and middle initial.
PC 02	44	First First, Middle	PER	FIRST NME	15		Last Name First Name	P12	Yes Yes	Yes	name, and middle initial.
-	45	Middle	PER	MIDDLE INIT NME	15	AN	Middle Initial	P12	Yes	Yes	
-	46	Suffix	PER	SUFFIX NME	5	AN	Suffix	P12	Yes	Yes	
	41	JuillX	LEK	SOLLIV ININE	ິນ	AIN	Juliix	FIZ	162	162	

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	ммисс	MMUCC	CMV	Definition
	On Form	3	Table	222 00:4:::::		. , , ,		Code	Compliant	· ·	25
										Ī	to be used only when date of birth cannot be
											obtained) of the person involved in the
PC 04	48	Date of Birth	PER	BIRTH_DATE	10	Date	MM/DD/YYYY - 9 = unknown	P1	Yes	Yes	collision.
							F - F emale				
					١.		M - Male			١.,	
PC 05	49	Sex	PER	SEX_CDE	1	AN	9 - Unknown	P2	Yes	Yes	The sex of the pe rson involved in the collision.
PC 03	50	Street/RFD, City, State, Zip	PER	ADDRESS TXT	30	AN	Address	No	No	No	Record the driver's ad dress c onsisting of street/RFD, s tate and zip.
F C 03	51	City	PER	CITY NME	15	AN	City	No	No	No	Street/RFD, State and 2rp.
	- 51	Oity	I LIX	OTT _INWE	13	AIN	State (Appendix I)	140	140	140	
	52	State	PER	STATE CDE	2	AN	Unknown = 99	No	No	No	
	53	Zip	PER	ZIP_CDE	5	N	Zip	No	No	No	
											List the driver's telephone number, including
PC11	54	Telephone Number	PER	PHONE_NUM	10	N	Driver Telephone Number	No	No	No	the ar ea code.
							Alphanumeri cidentifier assigned by the				
							jurisdiction				
							N/A = 0				
PC06	55	Driver License Number	DED	DRIVER LICENSE TXT	20	AN	Unknown = 9 If N/A or Unknown then fields 56- 63 bl ank.	P11	Yes	Yes	A unique number assigned by the authorizing
PC 00	33	Driver License Number	FER	DRIVER_LICENSE_IXI	20	AIN	III N/A OF UNKNOWN THEN FIELDS 56- 63 DEANK.	FII	162	165	agent issuing a driver license to the individual.
											The ge ographic or political entity issuing a
											driver license. Includes the States of the United States (including the District of
											Columbia and outlying ar eas), Indian Nations,
											U.S. Government, Canadian Provinces, and
							Appendix I				Mexico States (including the Distrito Federal),
PC 07	56	State (of Driver License)	PER	DL_STATE_CDE	2	AN	Unknown = 99	Yes	Yes	Yes	as well as other jurisdictions.
							A - Class A				
							B - Class B				
							C - Cl ass C				
							D - Cl ass D			١.,	A unique class assigned by the authorizing
PC 08	57	Class (of Driver License)	PER	DL_CLASS_CDE	1	Α	M - Class M	P11	Yes	Yes	agent issuing a driver license to the individual.
							T - Doubl e/Triple Trailer				
							P - Passenger				
							N - Tank Vehicle H - Hazardous Material				leaved to drivers often avecage fully assemblation
							M - Motorcycle				Issued to drivers after successfully completing a specialized test that qualifies them to operate
							X - Com bination of N and H				a specific type of commercial motor vehicle or
		Endor sem ent(s) (Driver					S - School Bus				ride a motorcycle.
PC 09		License)	END	DL ENDORSE CDE	1	Α	O - Other	PL2	Yes	Yes	
							1 - Corrective Lenses				
							2 - Left outside rear view mirror				
							3 - Rest riction #1 or #2				
							4 - Automatic Transmission				
							5 - Turn indicators and pow er steering or steering knob				
							6 - Food, fruit, or candy within reach of driver				
							7 - Adequat e artificial limbs				
							8 - Automatic Transmission on Commercial				
							Vehicle				
							9 - Accom panied by licens ed dr iver in front				
							seat				
							0 - Motorcycle only				
							A - Motorcycle Learners License				
							K - In trastate Only				
							M - When operating a Class A vehicle restricted to aut omatic transmission			1	
							N - W hen oper ating a Class B ve hicle restricted			1	
							to aut om atic transm ission			1	
							P - When o perating a Class C vehi cle restricted			1	
							to aut om atic transm ission			1	
							R - I gnition interlock dev ice			1	
							V - Vehicle without air brakes			1	Restrictions assigned to an individual's driver
	L			L	1 .	l	E - When operating passenger bus restricted to	l	l	l	licen se b y he licens e exa miner.
PC 10	б1 - 63	Restriction(s) (Driver License)	KST	DL_RESTRICT_CDE	1	AN	Class B or C vehicle	PL1	Yes	No	Up to three ent ries al lowed.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table			31		Code	Com pliant		
PC12		Injury Severity	PER	INJURY_SEVER_CDE	1	N	O - Not Applicable 1 - No Injury 2 - Possibl e Injury 3 - Non-inca pacit ating Injury 4 - Incap acit ating Injury 5 - Fa tal Injury 9 - Unknown Injury	P4	Yes	No	The injury severity level for any person involved in the collision.
		Type of Injury	INJ	INJURY TYPE CDE	1	N	0 - Not Applicable 1 - Head 2 - Trunk Ext ernal 3 - Trunk Internal 4 - Arms 5 - Legs 9 - Unknown If 64 = 2-5 then 65 -69 m ust have at least one	PL5	Partial	No	The primary or most obvious area of the person's body injured during the collision.
PC21		Person Condi tion at Time of Collision	PER	PERSON_COND_CDE	2	N	00 - Not Applicable 01 - Appare ntly Normal 02 - Drinking - Ability Impaired 03 - Odor of Alcohol Bever age 04 - Illegal Dru gs 05 - Under the Influence of Medication 06 - Very Tired 07 - Sleepy 08 - Ill (Sick) 09 - Dizzy/Faint 10 - Emotional (depressed, angry, disturbed, etc.) 11 - Other 99 - Unknown Required for Driver or Pedestrian or Bicycle	P14	Yes	No	Any relevant condition of the driver that is directly related to the collision.
PC 16		Occupant Protection System Use	PER	RESTRAINT USE CDE	2	N	00 - Not Applicable (non-motorist) 01 - None Used 02 - Lap Belt Only 03 - Shoulder Belt Only 04 - Shoulder and Lap Belt 05 - Child Restraint Type Unknown 06 - Restraint Used - Type Unknown 07 - Helmet Used 08 - Child Restraint - Forward Facing 09 - Child Restraint - Rear Facing 10 - Booster Seat 11 - Other 99 - Unknown Required for Driver or Passenger Driver cannot be 05, 08, 09 or 10	P7	Yes	No	The restraint equipment in use by the occupant, or the helmet use by a motorcyclist, at the time of the collision.
PC17		Air Bag Deployed		AIR_BAG_DEPLOY_CDE	1		0 - Not Applicable 1 - Not Deployed 2 - Deployed - Front 3 - Deployed - Side 4 - Deployed - Other (knee, air belt, etc.) 5 - Deployed - Combination 9 - Deployment Unknown Required for Driver or Passenger 0 - Not Applicable 1 - Not Ejected	P8	Yes		Deployment status of an air bag relative to the position in the vehicle for this occupant.
PC 18		<u>Ejected</u> Extricated		EJECTION_CDE	1		2 - E jected, Partially 3 - Ejected, Totally 9 - Unknown Do not use is field 89 = 15, 16 or 19 0 - Not Applicable 1 - No 2 - Yes	P9 No	Yes No	No No	Occupa nt compl etely or partially thrown from the interior of the motor vehicle, excluding motorcycles, as a result of a co llision. Occupa nt compl etely or partially thrown from the interior of the motor vehicle, excluding motorcycles, as a result of the collision.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table		ŭ	٠.		Code	Com pliant		
							0 - Not Applicable 1 - Blood 2 - Breath 3 - Blood/Breath 4 - Test Refused				
PC 19 PC 20	75	Chemical Test	PER	DUI TEST CDE	1	N	5 - None G iven 6 - Other Only for Driver, Pedestrian or Bicycle	P18 P20	Partial	No	Indication of the presence of alco hol by test, type, and result.
1020		BAC Test Results		BAC RESULTS NUM	2	N	Test Results	P18	Yes		Capture alcohol concentration when ever a driver or non-motorist is tested.
PC 14	77	Transported By	PER	TRANS_MED_BY_NME	30		Name of em erge ncy servi ce o r person transporting injured.	P28	Yes		Name of em erge ncy servi ce o r person transporting injured.
PC 15	78	To Medical Facility	PER	TRANS_MED_FAC_NME	30	AN	Name of organization	No	No	No	private, capa ble of providing em ergency medical services r equired as a result of highway traffic collisions on highways in a given jurisdiction.
VC 14	79	License Plate Number	UNT	LICENSE_PLATE_TXT	9	AN	Vehicle License Plate Number	V4	Yes		The alphanumeric identifier or other characters, exactly as displayed, on the registration plate or tag affixed to the motor vehicle.
VC 15		License Plate State		LP_STATE_CDE	2		Appendix I - 00 if field 79 = NONE	V3	Yes		The state, commonwealth, territory, Indian Nation, U.S. Government, foreign country, etc., issuing the registration plate.
VC 16	81	License Plate Month	UNT	LP_MONTH_NUM	2	N	Month of license plate - 00 if field 79 = NONE	V3	Yes	Yes	Month of license plate.
VC 16	82	License Plate Year	UNT	LP_YEAR_NUM	4	Ν	YYYY - 0000 if field 79 = NONE	V3	Yes	Yes	The year of registration as indicated on the registration plate displayed on the motor vehicle.
VC 13	83	Vehicle Identification Number	UNT	VEHICLE_ID_TXT	17	AN	VIN - N/A = 0 , Unknown = 9	V1	Yes		A unique combination of alphanumeric or numeric characters assigned to a specific motor vehicle that is designated by the manufacturer.
VC 07		Vehicle-Year	UNT	VEHICLE_YEAR_NUM	4	N	YYYY - N/A = 0, Unknown = 9	V6	Yes	No	The year which is assigned to a motor vehicle by the manufacturer.
VC 08		Vehicle Color	UNT	VEHICLE_COLOR_CDE	3	AN	Appendix G	No	No	No	Color of the vehicle involved in the collision.
VC 08	86	Vehicle Color (Second Color)	UNT	VEHICLE_COLOR2_CDE	3	AN	Appendix G	No	No	No	Color of the vehicle involved in the collision.
VC 09	87	Vehicle-Make	UNT	VEHICLE_MAKE_CDE	4	AN	Appendix H	V5	Yes	No	The distinctive make name applied to a group of motor vehicles by a manufacturer.
VC 10	88	Vehicle-Model	UNT	VEHICLE_MODEL_CDE	4	AN	Manufacturer-assigned model	V7	Yes	No	The manufacturer-assigned model denoting a family of motor vehi cles (within a make) that have a degree of similarity in const ruction, such a s body, chassis, etc.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
							00 - Not Applicable 01 - Passenger Vehicle-2 D oor 02 - Passenger Vehicle-4 Door 03 - Passenger Vehicle-Convertible 04 - Pickup T ruck 05 - Single-Unit T ruck (2 ax les) 06 - Single-Unit T ruck (3 or more ax les) 07 - School Bus 08 - Truck/Trailer 09 - Truck-Tractor (bobtail) 10 - Truck-Tractor/Semi-Trailer 11 - T ruck-Tractor/Triple 13 - Bus/Large Van (seats for 9 - 15 occupants, including driver) 14 - Bus (seats 16 or more occupants, including driver) 15 - Motorcycle 16 - Motor Scooter/Moped 17 - Motor Home 18 - Farm Machinery 19 - ATV 20 - Sport Utility Vehicle (SUV) 21 - Passenger Van 22 - Truck More Than 10,000 lbs., Cannot				The category indicating the general configuration stye or shape of a motor vehicle
VC11							23 - Van (10,000 lbs. or less)				distinguished by characteristics such as a
& VC60	89	Vehicle Configuration	UNT	VEHICLE TYPE CDE	2	N	24 - Other 99 - Unknown	No	No	No	num ber of doors, rows of seats, windows, or roof line.
VC 68	90	Extent of Damage	UNT	DAMAGE_EXTENT_CDE	1	N	0 - Not Applicable 1 - None 2 - Minor 3 - Functional 4 - Disabling 9 - Unknown 0 - Not Applicable 1 - No 2 - Owner	V24	Yes	No	Estimation of total dam age to motor vehicles from crash. Disabling damage implies damage to the motor vehicle that is sufficient to require the motor vehicle to e towed or carried from the scene.
							3 - Operator 4 - Exem pt				Indicates evidence of minimum liability
VC 19	91	Insurance Verification	UNT	SECURITY_VERFY_CDE	1	N	9 - Unknown	No	No	No	insur ance.
VC20	92	Insurance Company Name	UNT	INSURANCE CO NME	30	AN	Name of insurance company	No	No	No	Busi ness na me of the company maintaining insur ance on a vehicle.
											List the policy number as shown on the
VC21	93 94	Insurance Policy Number Insurance Phone Number		INS_POLICY_NO_TXT INS_PHONE_NUM	20 10	AN N	Policy Number Phone Number	No No	No No	No No	Security Verification Form.
										.,,	Nam e of person or entity that removed the
	95	Vehicle Removed By	UNT	VEHICLE_REMOVE_NME	30	AN	Name of person or entity.	ļ			vehicle from the scen e of the collision.
VC 17	96	Vehicle Owner's Name (Non-commercial)	PER	LAST NME	20	AN	Last Name	No	No	No	Name of the vehicle owner.
	97	First	PER	FIRST_NME	15	AN	First Name	No	No	No	-
	98	Middle		MIDDLE_INIT_NME	1	AN	Middle Initial	No	No	No	
	99	Suffix	PER	SUFFIX_NME	5	AN	Name Suffix	No	No	No	The consolidation of the Conso
VC 18	100	Vehicle Owner's Address	PER	ADDRESS TXT	30	AN	Address	No	No	No	The complete present address of the registered owner of the unit.
V 3 10	101	City	PER	CITY NME	15	AN	City	No	No	No	registered owner of the unit.
	102	State	PER	STATE_CDE	2	AN	State (Appendix I)	No	No	No	
	103	Zip	PER	ZIP_CDE	5	N	Zip	No	No	No	
VC 35	104	Oversized Load	UNT	OVERSIZE_LOAD_CDE	1	AN	0 - Not Applicable N - Not Permitted P - Permitted	No	No	Yes	Indicates whe ther or not the load is over sized.

By Field on Form

<u>-, .</u>		11 1 01111									20-341-2000
Num	Field On Form	Name of Element	DB2 Table	DB2 Column Name	Length	Type	Code & Attribute	MMUCC Code	MMUCC Compliant	CMV	Definition
	Oli Folili		Table					Code	Compilant		
							00 - Not Applicable - CMV				
							01 - Boat Trailer				
							02 - House Trailer				
							03 - Farm Trailer				
							04 - Horse Trailer				
							05 - Another Vehicle				
							06 - Utility Trailer				
							07 - Homemade Trailer				
							08 - Box Trai ler				
							09 - Stock Trai ler				
							10 - Cam ping Trai ler				
							11 - Combination				
		Tawad Mahiala Tura					12 - Other				Vahi ala hai na kawadi. Ewa ludaa aana manaial
VC 06	105	Towed Vehicle Type (Non-commercial)	LINIT	TOWED VEHICLE CDE	2	N		NI-	Na	Nia	Vehicle being towed. Excludes commercial vehicles.
VC 06	105	(Non-commercial)	UNT	TOWED_VEHICLE_CDE		IN	99 - Unknown	No	No	No	venicies.
	400			VELUCI E DOLLED ODE		١.	N - No (Unchecked)			١	
	106	Vehicle Rolled	UNT	VEHICLE_ROLLED_CDE	1	А	Y - Yes (Checked)	No	No	No	Indicates whe ther or not the vehicle rolled.
							N - No (Unchecked)				
VC 29	107	Vehicle Burned	UNT	VEHICLE_BURNED_CDE	1	Α	Y - Yes (Checked)	No	No	No	Indicate whet her or not the vehi cle was bur ned.
							N - No (Unchecked)				Indicates whe ther or not there was a ph one
	108	Phone Present	UNT	PHONE PRESENT CDE	1	Α	Y - Yes (Checked)	No	No	No	present in the vehi cle.
							N - No (Unchecked)				Indicates whether or not a phone was in use by
	109	Phone in Use	UNT	PHONE IN USE CDE	1	Α	Y - Yes (Checked)	No	No	No	the driver at the time of the collision.
	100	1 Hone in Occ	0111			,,,	1 Tes (enesites)	110	140	140	The citation num ber of the of fense f or which
VC31	110	Citation Number	CIT	CITATION NUM TXT	9	AN	Citation Number	No	No	No	the pe rson(s) was ar rested or cited.
VUST	110	Citation Number	CII	CITA FION_N UM_T XT	9	AIN	Citation Number	INU	INO	INO	
		Statute/Ordinance Number of					a				All motor vehicle-related violations, if any which
VC 30	111	Citations Issued	CIT	ORDINANCE_NUM_TXT	15	AN	Stat ute/City Ordinance	P15	No	No	apply to this driver.
											The ci tation num ber of the of fense f or which
VC31	112	Citation Number	CIT	CITA TION_N UM_T XT	9	AN	Citation Number	No	No	No	the pe rson(s) was ar rested or cited.
		Statute/Ordinance Number of									All motor vehicle-related violations, if any which
VC 30	113	Citations Issued	CIT	ORDINANCE NUM TXT	15	AN	Stat ute/City Ordinance	P15	No	No	apply to this driver.
	114	Investigating Officer	ENV	INV OFFICER NME	20		Officer Name	No	No	No	Name of the investigating officer.
EC 24	115	Badge Number	ENV	INV OFCR BADGE NUM	5	N	Badge Number	No	No	No	Badge number of the investigating officer.
LU 24	113	Bauge Number	LINV	INV_OI CIN_BADGE_NOW	J	IN		INU	INU	INU	badge number of the life stigating officer.
							Appendix C				
							If field 315 = 1 (OHP) and Troop = A-M then				OHP troopers must fill in the letter of the Patrol
EC 25	116	Troop/Div.	ENV	INV_OFCR_TROOP_CDE	02/04	AN	match field 16 (County) to Troop	No	No	No	troop t o which he /she i s ass igned.
											OHP troope rs m ust fill in the I etter of the Patrol
ED 03	116A	Troop of Collision	ENV	COLLSION_TROOP_CDE	2	AN	Appendix C	No	No	No	troop in which the collision occured.
											The reviewer of the report who accepts it as
											complete and accurate must put his/her initials
EC 26	117	Reviewer Initials	ENV	REVIEW INITS TXT	3	AN	Reviewer initials	No	No	No	and b adge num ber in the proper spaces.
	118	Reviewer Badge Number	ENV	REVIEW BADGE NUM	5	N	Badge number of reviewer	No	No	No	
	110	Treviewer Budge Humber		TEVIEW_BABGE_ITOM		- ' '	Baage number of reviewer	110	140	140	The date the report was written by the
EC 27	110	Data of Danast	ENV	DEDORT DATE	10	Date	MM/DD/WWW	No	No	No	The date the report was written by the
EC21	119	Date of Report	EINV	REPORT_DATE	10	Date	MM/DD/YYYY	INO	INO	INO	investigating officer.
											Case i dentification number can be used by the
											reporting ag ency. This is not to be confused
											with the D ocum ent Identifier assigned by the
											Department of Public Safety upon receipt of the
	120	Case Number	ENV	CASE_NUMBER_TXT	10	AN	Case Number	No	No	No	collision report.
	121	Page of			2	N	Page number of number of pages	No	No	No	Used to keep track of collision report page s.
				1			5				The unique number assigned for this collision
			1	1	1	1					to the motor vehicle in which this person was
PC 01	122	Person's Motor Vehicle Unit	DED	UNIT ID	2	AN	Person vehicle unit number	P5	Yes	No	
FOUL	122	i eraon a motor venicie offit	FER	OI411_ID		AIN	i eraon venicie unit nunibel	Fΰ	162	INU	an occupant.
			1	1	1	1					Indicate whe ther the persons listed is injured,
						l					witness, and/ or pas senger. It may be
			1	1	1	1					necessa ry to mark more the one square. For
			1	1	1	1	N - No (Unchecked)				example, "injured-passenger, or
	123	Injured	PER	INJURED_CDE	1	Α	Y - Yes (Check ed)				"witness-passenger".
							N - No (Unchecked)				
			1	1	1	1	Y - Yes (Checked)				
	124	Witness	PER	WITNESS_CDE	1	Α	Unit must be Wn				
			T		<u> </u>		N - No (Unchecked)				
	125	Passenger	DED	PASSENGER CDE	1	_	Y - Yes (Checked)				
	123	i assenger	IL LIV	I AGGENGEN_CDE		_ ^	1 - 1 E3 (OHECK EU)	I			l .

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table			,		Code	Com pliant		
							N - No (Unchecked)				
	126	Property Owner	PER	PROPERTY_OWNER_CDI	1	Α	Y - Yes (Check ed)				
							, , , , , , , , , , , , , , , , , , , ,				
							00 - Not Applicable				
							11 - Front Seat-Driver				
							12 - Front Seat-Middle				
							13 - Front Seat -Right Side				
							18 - Front Seat -Other				
							21 - Second Seat-Left Side				
							22 - Second Seat-Middle				
							23 - Second Seat-Right Side				
							28 - Second Seat-Night olde				
							31 - Third Seat-Left Side				
							32 - Third Seat-Middle				
							33 - Third Seat-Right Side				
							38 - Third Seat-Other				
							41 - Fourth Seat-Left Side				
							42 - Fourth Seat-Middle				
l							43 - Fourth Seat-Middle			l	
	1			1			48 - Fourth Seat-Right Side	1		1	
							50 - Sleeper Section of Truck Cab			l	
	1			1			51 - Other Passenger in enclosed pas senger or	1		1	
							cargo ar ea (includes passeng ers in 5th row of				
	1			1			15-seat, 5-row vans)	1		1	
							52 - Other Passenge rin une nclosed p assenger				
							or car go ar ea				
							53 - Other Passenge r in pas senger or cargo				
							area, unknown whether or not enclosed				
							54 - Trailing Unit				The location for this occupant in, on or outside
							55 - Riding Vehi cle Exterior				of the motor vehicle prior to the first event in
PC 22	127	Seating Position in Vehicle	PER	SEAT POSITION CDE	2	N	99 - Unknown	P6	Yes	No	the s equence of events.
		<u> </u>									The full nam e of the individual driver, any
											injured witness or passenger last name, first
	128	Person: Last, First, Middle	PER	LAST NME	20	AN	Last Name	P12	Yes	Yes	name, and middle initial.
	129	First	PER	FIRST NME	15	AN	First Name	P12	Yes	Yes	
	130	Middle	PER	MIDDLE INIT NME	1	AN	Middle Initial	P12	Yes	Yes	
	131	Suffix	PER	SUFFIX NME	5	AN	Suffix	P12	Yes	Yes	
				_							to be used only when date of birth cannot be
							MM/DD/YYYY				obtained) of the pe rson involved in the
	132	Date of Birth	PER	BIRTH_DATE	10	Date	9 - Unknown	P1	Yes	Yes	
				_			F - Female				
							M - Male				
	133	Sex	PER	SEX CDE	1	AN	9 - Unknown	P2	Yes	Yes	The sex of the pe rson involved in the collision.
											Record the driver's address consisting of
	134	Street/RFD, City, State, Zip	PER	ADDRESS_TXT	30	AN	Address	No	No	No	street/RFD, state and zip.
	135	City	PER	CITY_NME	15	AN	City	No	No	No	
	136	State	PER		2	AN	State (Appendix I)	No	No	No	
	137	Zip	PER	ZIP_CDE	5	N	Zip	No	No	No	
											List the driver's telephone number, including
L	138	Person Telephone Number	PER	PHONE_NUM	10	N	Person Telephone Number	No	No	No	the ar ea code.
							0 - Not Applicable				
	1			1			1 - No Injury	1		1	
l							2 - Possibl e Injury			l	
	1			1			3 - Non-inca pacit ating Injury	1		1	
	1			1			4 - Incap acit ating Injury	1		1	
	1			1			5 - Fa tal Injury	1		1	The injury severity level for any person involved
PC 12	139	Injury Severity	PER	INJURY_SEVER_CDE	1	N	9 - Unknown Injury	P4	Yes	No	in the collision.
							0 - Not Applicable				
	1			1			1 - Head	1		1	
	1			1			2 - Trunk Ext ernal	1		1	
	1			1			3 - Trunk Internal	1		1	
							4 - Arms			1	
	1			1			5 - Legs	1		1	The primary or most obvious area of the
PC 13	140 -144	Type of Injury	INJ	INJURY_TYPE_CDE	1	N	9 - Unknown	PL5	Partial	No	person's body injured during the collision.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
PC 16		Occupant Protection Sy stem Use	PER	RESTRAINT_USE_CDE	2	N	00 - Not Applicable (non-motorist) 01 - None Used 02 - Lap Belt Only 03 - Shoulder Belt Only 04 - Shoulder and Lap Belt 05 - Child Restraint Type Unknown 06 - Restraint Used - Type Unknown 07 - Helmet Used 08 - Child Restraint - Forward Facing 09 - Child Restraint - Rear Facing 10 - Booster Seat 11 - Other	P7	Yes	No	The restraint equipment in use by the occupant, or the helmet use by a motorcyclist, at the time of the collision.
PC 17	146	Air Bag Deployed	PER	AIR_BAG_DEPLOY_CDE	1	N	0 - Not Applicable 1 - Not Deployed 2 - Deployed - Front 3 - Deployed - Side 4 - Deployed - Other (knee, air belt, etc.) 5 - Deployed - Combination 9 - Deployment Unknown	P8	Yes	No	Deployment status of an air bag relative to the position in the vehicle for this occupant.
PC 18	147	Ejected	PER	EJECTION_CDE	1	N	0 - Not Applicable 1 - Not Ejected 2 - Ejected, Partially 3 - Ejected, Totally 9 - Unknown	P9	Yes	No	
PC 25	148	Extricated	PER	EXTRICATED_CDE	1	N	0 - Not Applicable 1 - No 2 - Yes	No	No	No	Occupa nt compl etely or partially thrown from the interior of the motor vehicle, excluding motorcycles, as a result of the collision.
PC 14	149	Transported By	PER	TRANS MED BY CDE	30	AN	Name of em erge ncy servi ce o r person transporting injured.	P28	Yes	No	Name of em erge ncy servi ce or person transporting injured.
1014	143	Transported by	I LIX	TRANS_MED_BT_COL	30	AN	transporting injured.	120	163	140	private, capa ble of providing em ergency medical services r equi red as a result of highway traffic collisions on highways in a given
PC 15		To Medical Facility	PER	TRANS_MED_FAC_NME	30		Name of organization	No	No	No	jurisdiction.
	151	Type of Property Damaged	ENV	PROP_DA MAGED_TXT	30	AN	List property damaged	No	No	No	List damaged property. The unique number assigned for this collision to the motor vehicle in which this person was
	152	Unit Number	CMV	UNIT_ID	2	AN	Person vehicle unit number	P5	Yes	No	an occupant.
VC 48	153	Carrier Name	CMV	CARRIER_NME	30	AN	Carrier Name	V26	Yes	Yes	The nam e of an individual, part nership or corporation respon sible for the transportation of person or property as indicated on the shipping manifest.
V0.50	454	Consider State of Address	CMV	CARRIER ARRESTY	20	4.01	Charat Address a	VC 26	V		The ad dress of an individual, partnership or corporation responsible for the transportation of persons or property as indicated on the
VC 50 VC 51	154 155	Carrier Street Address Carrier City, State, Zip Code	CMV	CARRIER_ADDR_TXT CARRIER CITY NME	30 15	AN AN	Street Addres s City	VC26 VC26	Yes Yes	Yes	shipping manifest. Nam e of the car rier's city, state and zi p code.
. 50.	156	State State	CMV		2	AN	State (Appendix I)	VC 26	Yes	Yes	in the second se
	157	Zip	CMV	CARRIER_ZIP_CDE	5	N	Zip Code	VC26	Yes	Yes	
VC 52	158	GVWR/GCWR	CMV	GVWR_GCWR_CDE	1	А	C - GCWR V - GVWR	V27	Yes	Yes	the am ount recommended by the manufacturer as the up per limit to the operational weight for a motor vehicle and any cargo (human or other) to be carried. The Gross Combination Weight Rating (GCWR) is the sum of all GVWR's for each unit in a combination-unit motor vehicle.
	159	Weight Rating	CMV	WEIGHT_RATE_CDE	1	N	1 - 10,000 l bs. or less 2 - 10,001 - 26,000 l bs. 3 - more than 2 6,000 l bs.				
VC 53	160	Axle Quantity	CMV	AXLES_NUM	2	N	Total number of Axles	No	No	Yes	The num ber of common ax les of rotation of one or more wheel s of a vehi cle, whet her power driven or freely rotating.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	ммисс	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
	161	Cargo Body Type	CMV	CARGO_BODY_CDE	2	Z	00 - Not Applicable 01 - Bus 9-15 Seats 02 - Bus 16+ Seats 03 - Van/ Encl osed Box 04 - Cargo Tank 05 - Flatbed 06 - Intermodal 07 - Dump T ruck/ Trailer 08 - Concre te Mixer 09 - Auto T ranspor ter 10 - Garbage/Rufuse 11 - Hopper(grain/chips/gravel) 12 - Pole Trai Ier 13 - Log Trailer 14 - Vehicle Towing Vehicle 15 - Other 99 - Unknown	V29	Yes	Yes	The type of body for buses and trucks more than 10,000 lbs. GVWR.
VC46	162	Vehicle Use	CMV	VEHICLE_USE_CDE	1 9	N AN	1 - Interstate 2 - Intrastate 3 - Other, Non-Commercial 4 - Government	V26	Yes	Yes	Interstate Commerce: Tr ade, traffic or transpor tation in the Uni ted States Bet ween a place in a State and a place outside of such State (including a place outside of the U.S.) Between two places in a State through another State or a place outside of the U.S. tween two places in a State as part of trade, traffic or transportation originating or terminating outside the State or the U.S. Required to have a USDOT number. Intrastate Commerce: Used for a carrier that operates entirely within the state Not required to have USDOT number USDOT numbers in the process of being assigned to Intrastate motor carriers in a number of states Should include state two-character abbreviation on the end (Example: USDOT 123456XX) Not In Commerce - Government Any government vehicle whether operated by local, state or federal government in most circumstances, will not have a USDOT number Not in Commerce - Other Trucks This selection is used for personal rental vehicles (U-Haul, Penske, etc.) over 10,000 pounds GVWR/GCWR operated by a private individual. The identification number of an individual, partnership or corporation responsible for the transportation of persons or property as indicated on the shipping manifest.
	164	NASI Report Number	CMV	VEHICLE_INSP _TXT	12	AN	Vehicle Inspection Number	No	No	No	Added at the request of Troop S.
VC 54		Haz Mat Placard Identification Number	CMV	HAZ_MAT_PLACRD_ID	4	N	Four digit placard num ber or name taken from the m iddle of the di amond or from the rectangul ar box O ne di git placard num ber from the bottom of diamond	V30	Yes	Yes	Indicate that a motor vehicle had a hazardous materials placard as required by federal/state regulations.

By Field on Form

O-J			

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
							00 - Not Applicable 01 - Explosives 02 - Gases - Com pressed, Dissolved or Refrigerated 03 - Flammable Liquid 04 - Flammable Solids - Combustible, Water Reacti ve 05 - Oxidizing Substances - Organic Peroxides 06 - Po ison ous (Toxic) and Infect ious Substances 07 - Radioactive Material 08 - Corr osives				
VC 55	166	Haz Mat Class	CMV	HAZ MAT CLASS-CDE	2	N	09 - Miscellaneous Dangerous Goods 99 - Unknown	V30	Yes	Yes	Hazard class or division number displayed in the bottom section of a placard.
VC 05				HAZ MAT INVOLV CDE	1		N - No (Unchecked) Y - Yes (Check ed)	V30	Yes		Indication whether or not hazardous material
							N - No (Unchecked)				Indicate whether or not hazardous material
VC 56	168	Hazardous Material Released	CMV	HAZ_MAT_SPILL_CDE	1	Α	Y - Yes (Check ed)	V30	Yes	Yes	were released.
	169	Case Number	ENV	CASE NUMBER TXT	10	AN	Case Number	No	No	No	Case i dentification number can be used by the reporting agency. This is not to be confused with the Document Identifier assigned by the Department of Public Safety upon receipt of the collision report.
	170	Page of			2	N	Page number of number of pages	No	No	No	Used to keep track of collision report page s.
		Unit Number	UNT	UNIT_ID	2	AN	Person vehicle unit number	P5	Yes		The unique number assigned for this collision to the motor vehicle in which this person was an occupant.
VC67	172	Total Lanes in Roadway	UNT	TOT_LANES_NUM	2	N	Total num ber of lanes	V15	Yes		The total number of lanes in the roadway on which this motor ve hicle was traveling. Undivided Highways: Total "Thru" Lanes in Both Directions (excluding designated turn lanes). Divided Highways: Total "Thru" Lanes for the Roadway (on which the motor vehicle under consideration was traveling).
VC 25	173	Legal Speed	UNT	LEGAL_SPEED_NUM	2	N	Autho rized Val ue - 05 t o 80	V12	Yes	No	Autho rized speed limit for the motor vehicle at the time of the collision

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table			,,,,		Code	Com pliant		
							00 - Not Applicable 01 - Cross ing at Intersection 02 - Crossing at Other Crosswalk 04 - Getting on Vehicle 05 - Getting off Vehicle 05 - Getting or Riding with Traffic 07 - Walking or Riding Against Traffic 08 - Pushing on Vehicle 09 - Playing or Working on Vehicle 10 - Playing 11 - Other Working 12 - Entering or Crossing Speci fied Lo cation 13 - Enter ing or Crossing from Behind Other Vehicle 15 - Walking or Riding after Leaving or Returning to Disable Vehicle with Traffic 16 - Walking or Riding after Leaving or Returning to Disable Vehicle Against Traffic 17 - Approaching or Leaving School Bus 18 - Approaching or Leaving Other Vehicle 19 - Standing 20 - Lying, not in Roadway 21 - Sitting in a Vehicle Not in Transport 22 - Improper Cross ing 23 - Dart ing 24 - In Roadway (Standing, on Knees, Lying, Etc.) 25 - Failure to Yield Right-of Way 26 - Not Visible (Dark Clothing) 27 - Inattentive (Talking, Eating, Etc.) 28 - Failure to Obey Traffic Signs, Signals, or Officer 29 - Wrong Side of Road 30 - Other				
PC23		Pedest rian/Pedal cyclist Actions Prior to Collision	UNT	PED ACTION CDE	2	N	99 - Unknown Unit Type = B, P, X or Z	P23	Yes	No	Actions that the no n-motorist was under taking at the time of the collision.
PC28		Pedest rian/Pedal cyclist		PED_ACTION_CDE	2	N	00 - Not Applicable 01 - Marked Crosswalk at Intersection 02 - At intersection But No Crosswalk 03 - Non-Intersection Crosswalk 04 - Driveway Access Crosswalk 05 - In Roadway (not in crosswal k or intersection) 06 - Median (but not on shoulder) 07 - Island 08 - Shoulder 09 - Sidewalk 10 - Roadsi de 11 - Outside Traf ficway 12 - Dedicated Bike Lane 13 - Shared-Used Path or Trails 14 - Inside Building 15 - Other 99 - Unkn own Unit Type = B, P, X or Z	P25	Yes		The non-motorist's location with respect to the roadway at the time of the col lision.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table		g	.,,,		Code	Com pliant		
							0 - Not Applicable 1 - None 2 - Hel met 3 - Protective Pads Used (Elbows, Knees, Shins, Etc.) 4 - Reflective Clothing (Jacket, Backpack, Etc.) 5 - Lighting 6 - Other				
DC 20		Pedestrian/Pedalcyclist Safety	LINIT	DED CAET FOUND ODE	1	NI.	9 - Unknown	Dac	Vaa	Na	The safety equipment used by the
PC 29		Equipment Unit Number of Motor Vehicle	UNT	PED_SAFT_EQUIP_CDE	- 1	N	Unit Type = B, P, X or Z Unit number of motor vehicle that was the first	P26	Yes	No	non-motorist.
PC30		Striking Pedestrian/Pedalcyclist	UNT	UNIT_STRIK_PED_CDE	2	AN	motor vehicle to strike the non-motorist. Unit Type = B, P, X or Z	P27	Yes	No	Number assigned to identify the motor vehicle that struck the non-motorist in the collision.
EC40	178	Work Zone-Related	ENV	WORK_ZONE_CDE	1	Α	N - No (Unchecked) Y - Yes (Checked)	C19	Yes	No	Was the collision in or near a construction, maintenance or utility work zone?
		Work Zone- Related T ype of Work Zone		WRK_ZNE_TYPE_CDE	1	N	O - Not Applicable if 178 = No Lane Closure Lane S hift/Crossov er Work on Shoulder or Median Intermittent or Moving Work Luknown	C19	Yes	No	
		Work Zone- Related Lo cation of the Collision	ENV	WRK ZNE LOC CDE	1	N	O - Not Applicable if 178 = No 1 - Before First Warning Sign 2 - Advance Warning Area 3 - Transition Area 4 - Activity Area 5 - Termination Area 9 - Unknown	C19	Yes	No	
	100	the Collision	LINV	WKK_ZNE_LOC_CDL		IN	0 - Not Applicable if 178 = No	019	163	INO	
		Work Zone-Related Workers Present	ENV	WRK_ZNE_WORKER_CDE	1	AN	N - No Y - Yes 9 - Unknown	C19	Yes	No	
5000	100		ENV	LIGHT COND CDE		N	1 - Dayl ight 2 - Dark- Not Lighted 3 - Dark- Lighted 4 - Dawn 5 - Dusk 6 - Dark- Unknown L ighting 7 - Other 9 - Unknown	040	V	N-	The type/level of light existing at the time of the motor vehi cle col lision.
EC33	182	Light	LINV	EISTT GOND GDE	1	IN	01 - Clear 02 - Fog/ Smog/ Smoke 03 - Cloudy 04 - Rain 05 - Snow 06 - Sle et/Hail (Freezing Rain/Drizzle) 07 - Severe Crosswind 08 - Blowing Snow 09 - Blowing Sand, Soil, Dirt 10 - Other	C12	Yes	No	The prevailing atmospheric conditions existing
EC32	183	Weather	ENV	WEATHER_COND_CDE	2	N	99 - Unknown	C11	Yes	No	
EC 34	184	Locality	ENV	LOCALITY CLASS CDE	1	N	1 - Resi dent ial 2 - Busi ness 3 - Indust rial 4 - School 5 - Not Built-up 6 - Mixed Use 7 - Other 9 - Unknown	No	No	No	Indicate the classification of the area included within 500 feet of the col lision location.

By Field on Form

Num	Field On Form	Name of Element	DB2 Table	DB2 Column Name	Length	Type	Code & Attribute	MMUCC Code	MMUCC Compliant	CMV	Definition
EC37	185	Type of Intersection	ENV	INTERSECT TYPE CDE	1	N	0 - Not an Intersection 2 - Y-Intersection 3 - T-Intersection 4 - Four-Way Intersect ion 5 - Five-Point, or More 6 - Intersection as Part of Interchange 7 - Traffic Circle 8 - Roundabout 9 - Unknown	C17	Yes	No	An intersection consists of two or more roadways that intersect at the same level.
EC 36		Incident Type	ENV	INCIDENT TYPE CDE	2	N	00 - Not Incident 51 - Private Property (Private Way) 52 - Del iber ate Intent 53 - Medical Condi tion 54 - Legal Intervention 55 - Suicide 57 - Drowning 58 - Other Incident Report Must Be = 2	No	No	No	
EC39		Location of First Harmful Event		HARM EVENT LOC CDE		N	01 - On Roadway 02 - Shoul der 03 - Median 04 - Roadside 05 - Gore 06 - Separa tor 07 - In Par king La ne or Zone 08 - Off Roadway , Loc ation Unknown 09 - Outside Right-of-Way 10 - Other	C7	Yes	Yes	The location of the first harmful event as it relates to its position within the outside of the traffic way.
VC 36		What V ehicle W ere Go ing To		VEH GOING TODO CDE		N	00 - Not Applicable 01 - Go Ahead 02 - Turn Left 03 - Turn Right 04 - Make "U" Turn (Turnabout) 05 - Stop 06 - Slow for Cause 07 - Start from Park or Stop 08 - Change Lanes 09 - Overtake 10 - Pass 11 - Back 12 - Remain Sto pped 13 - Remain Parked 14 - Enter/Merge in Traffic 15 - Negotiate a Curve 16 - Park 17 - Other 99 - Unknown	V18	Yes		The controlled maneuver for this motor vehicle prior to the beginning of the sequence of event s.

By Field on Form

	icia oi										20-0ui-2000
Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
	On Form		Table				00 - Not Applicable 01 - Went Ahead 02 - Turned Left 03 - Turned Right 04 - Entered "U" Turn 05 - Stopped 06 - Slowed 07 - Started Fr om Park/Stop 08 - Entered Other Lane 09 - Overtaking 10 - Passi ng 11 - Backed 12 - Rem ained St opped 13 - Rem ained Par ked 14 - Entered/Merged 15 - Departed Roadway-Right	Code	Com pliant		
							16 - Departed Roadway-Left				
							17 - Swerved Right 18 - Swerved Left				
							19 - Parked				
VC 37	189	What Vehicle Did	UNT	VEH DID CDE	2	N	20 - Other 99 - Unknown	N.a	No	No	Indicates what the unit actually did before the
VC37	109	what vehicle Did	UNI	VEH_DID_CDE		IN		No	NO	INO	damage or injury producing event occurred.
VC 33	190	Visibility Obscured By	UNT	VISIBILITY_CDE	2	N	00 - Not Applicable 01 - Trees 02 - Embankment 03 - Building 04 - Signs 05 - Parked Vehicles 06 - High W eeds 07 - Fences 08 - Shrubbery (Bush, Hedge, etc.) 09 - Ice, Snow or Frost on W indows 10 - Smoke 11 - Fog 12 - Dust 13 - Rain 14Sun 15 - Other 99 - Unknown 0 - Not Applicable 1 - Electronic Communication Devices (cell phone, pager, etc.) 2 - Other Electronic Device (navigation device, palm pilot, etc.)	No	No	No	Indicate if there was a view obstruction for any driver involved in the collision. An obstruction could be trees, embankment, building, sign, parked cars, etc. Distractions which may have influence d the
							3 - Other Inside the Vehicle 4 - Other Outside the Vehicle				driver performance. The di stractions can be inside the motor vehicle (internal) or outside
PC24	191	Driver Distracted By	UNT	DRV_DISTRACT_CDE	1	N	9 - Unknown	P16	Yes	No	the motor vehicle (external).
VC 64	192	Underride/Override	UNT	UNDER_OVERRIDE_CDE	1	N	0 - Not Applicable 1 - No U nder ride or Over ride 2 - Under ride, Compartment Intrusion 3 - Under ride, No Compartment Intrusion 4 - Under ride, Compartment Intrusion Unknown 5 - Over ride, Motor Vehicle in Transport 6 - Over ride, Other Motor Vehicle 9 - Unknown Unit Number with Under-Over ride = 2 t hru 6 must be 1 less than T otal Vehicles	V22	Yes	No	An under ride refers to this motor vehicle sliding under another motor vehicle during a collision. An override refers to this motor vehicle riding up over anot her motor vehicle.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
	400	Total Control		TRAFFIG OUT OF			00 - No cont rol 01 - Stop Si gn 02 - Traffic Control Signal 03 - Flashing Traf fic Cont rol Signal 04 - School Zone Signs 05 - Yield Si gn 06 - Warning Si gn 07 - Railroad Advanc e Warning Si gn 08 - Railroad Cr oss Bucks 09 - Railroad Gates 10 - Railroad Signal 11 - No Passi ng Zone 12 - Person (including flagger, law enforcement, crossing guard, etc.) 13 - Abnormal Control 14 - Other	M-7	V.		The type of traffic control device application to
VC 38	193	Traffic Control	UNT	TRAFFIC_CNTL_CDE	2	N	99 - Unknown	V17	Yes	No	this motor vehicle at the collision location.
EC46	194	Roadway Surface Condition	ENV	ROADWAY_COND_CDE	2		01 - Dry 02 - Wet 03 - Ice/Frost 04 - Snow 05 - Mud, Dirt, Gravel 06 - Slush 07 - Water (standing, moving) 08 - Sand 09 - Oil 10 - Other 99 - Unknown	C13	Yes	No	The roadway surface condition at the time and place of the crash.
		•					1 - Level				
VC40 VC40		Road Character - Grade Road Char acter - Hori zontal Alianment	UNT	ROAD_GRADE_CDE	1	N	2 - Hillcrest 3 - Uphill 4 - Downhill 5 - Sag (bottom) 1 - Straight 2 - Curve Left 3 - Curve Right	V16 V16	Yes Yes		The geometric or layout and inclination characteristics of the roadway in the direction of travel for this vehicle. The geometric or layout and inclination characteristics of the roadway in the direction of travel for this vehicle.
VC 42		Road Surface Type	UNT	SURFACE_TYPE_CDE	1	N	1 - Concrete 2 - Asphalt 3 - Gravel 4 - Dirt 5 - Brick 6 - Other 9 - Unknown 1 - One-Way 2 - Two-Way - Not Divided 3 - Two-Way - Divided	No	No		The type of surface material on a roadway.
VC 39	198	Trafficway	UNT	ROADWAY_TYPE_CDE	1	N	4 - Two-Way - Divided - Posi tive Median Barrier 5 - Turn Lan e 6 - Ram p / Loop 7 - Dri veway 8 - Alley / Par king Lo t 9 - Unknown 0 - Not Applicable 1 - Towed Away (Due to Vehicle Damage) 2 - Towed Away (For Reasons Other Than Dam age) 3 - Rem ained a t Scene	V14	Yes		Indication of whether or not the traffic way for this vehi cle is divided and whether it serves one-way or two-way traffic. (A divided trafficway is one on which roadways for travel in opposite directions are physically separated by a median.) The method of disposition of the vehicle after
VC 24	199	Vehicle Removal	UNT	VEHICLE_REMOVE_CDE	1	N	4 - Dri ven f rom Scene 9 - Unknown	No	No	?	collision and name of person or wrecker company who removed the unit.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table			. , , .		Code	Com pliant		
VC45	200	Vehicle Condition		VEHICLE_COND_CDE	2	N	00 - Not Applicable 01 - Appare ntly Normal 02 - Brakes 03 - Headlights 04 - Steering 05 - Tail Ligh ts 06 - Brake Lights 07 - Tires/Wheels 08 - Suspension 09 - Signal lights 10 - Windows 11 - Truck Coupling/Trailer Hitch/Safety Chains 12 - Mirrors 13 - Wipers 14 - Power Train 15 - Other 99 - Unknown	V25	Yes		Pre-existing motor vehicle defects of maintenance conditions that may have contributed to the collision.
VC65	201	Special Function of Vehicle	UNT	SPECIAL_FUNC_CDE	2	N	00 - Not Applicable 01 - School Bus 02 - Transit Bus 03 - Intercity Bus 04 - Chart er Bus 05 - Other Bus 06 - Military 07 - OHP 08 - Other Police 09 - Other Law Enforcement 10 - Am bulance 11 - Fire Truck 12 - Pubic Owned Vehicle 13 - Highway Equipment 14 - Special Mobilized Machine 15 - Other 99 - Unknown	V10	Yes	No	The type of special function being served by this vehicl e regardl ess of whether the function is marked on the vehicle.
VC63	202	Emergency Motor Vehicle Use	UNT	EMRG_VEH_USE_CDE	1	N	0 - Not Applicable 1 - Yes 2 - No 9 - Unknown	V11	Yes	No	Indicates official motor vehicles that are involved in a collision while on an em ergency response.
EC35	203	Unsafe/Unlawful (Contributing Factors)		UNSAFE UNLAW CDE	2	N	Appendix D	No	No	No	The single action which the investigating of ficer believers to be the main or primary cause which contributed to the collision oc currence.
VC 44	204	Point of First Contact on Vehicle		FIRST_CONTACT_CDE	2	N	00 - Not Applicable 01 - 12 - 12-point Clock Diagram 13 - Top (roof) 14 - Undercarriage 99 - Unknown	V19	Yes	No	The ar ea of the m otor vehicle that received the initial impact in the collision.
VC44	205	Most Damaged Area on Vehicle	UNT	MST_DAMAGE_CDE	2	N	00 - Not Applicable 01 - 12 - 12-point Clock Diagram 13 - Top (roof) 14 - Undercarriage 99 - Unknown	V19	Yes	No	The are of the motor vehicle that was most damaged in the collision.
	206 207 208 209 210	Case Number Page of Latitude Longitude Railroad Crossing Number	ENV ENV ENV	CASE_NUMBER_TXT LATITUDE_NUM LONGITUDE_NUM RR CROSSING NUM	10 2 9 9	AN N N N	Case Number Page number of number of pages Latitude Longitude Railroad Crossing Number	No No No No	No No No No	No No No No	Case i dentification nu mber can be used by the reporting agency. This is not to be confused with the Document Identifier assigned by the Department of Public Safety upon receipt of the collision report. Used to keep track of collision report pages. Future Use Railroad Crossing Number
VC 18	211	Unit Number		UNIT_ID	2	AN	Person vehicle unit number	P5	Yes	No	The unique number assigned for this collision to the motor vehicle in which this person was an occupant.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	ммисс	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
							N - Nor thbound				The direction of the motor vehicle's travel on
							S - South bound E - East bound				the roadway before the collision. Notice that
							E - East bound W - Westbound				this is not a compass di rection, but a direction consistent with the designated direction of the
VC 32	212	Roadway Orientation	UNT	RD ORIENTATION CDE	1	Α	U - Unknow n	V13	Yes	No	road.
EC 28		Collision Diagram	DGM	COLLISION DIAGRAM			Diagram	No	No	No	Draw ing de picting the co Ilision sce ne.
		3		_							The unique number assigned for this collision
											to the motor vehicle in which this person was
VC 18	214	Unit Number	UNT	UNIT_ID	2	AN	Person vehicle unit number	P5	Yes	No	an occupant.
											The first four events in sequence related to this
\/O.57		Sequence of Events for	E) / E	EVENT ODE	0		Annual dia E	1,000		V	motor vehicle, including bo th non -collision and
VC57	215 - 218	Venicie	EVT	EVENT_CDE	2	N	Appendix E	V20	Yes	Yes	collision ev ents.
											Event that resulted in the most severe injury or, if no injury, the greatest property damage
EC 38	219	Most Harmful Event for Vehicle	UNT	MST HARM EVENT CDE	2	N	Appendix E	C6	Yes	Yes	involving this motor vehicle.
		First Harmful Event for									The first injury or dam age-produci ng ev ent that
VC 62	220	Collision	ENV	FST_HARM_EVENT_CDE	2	N	Appendix E	V21	Yes	Yes	char acterizes the col lision type.
											Narr ative ex plaining in sequence the order of
											events that happened before, during and after
	221	Remarks	RMK	COLLISION_REMARKS			Narrative	No	No	No	impact.
PC31	300	Person Number	PER	PERSON NUM	2	N	Num ber assi gned to non -motorist	P21	Yes	No	Number assigned to the pedestrian/pedalcyclist in the collision.
F C 3 1	300	r erson Number	FLIX	FERSON_NOW		IN	N - No	FZI	165	INU	III the comsion.
D	301	Citation Issued	UNT	CITATION ISU CDE	1	Α	Y - Yes				
											Derived age of person from the collected birth
PD 01	302	Person Age	PER	PERSON_AGE_NUM	3	N	Age	PD1	Yes	No	date.
											The unique identifier, once the reports is
-D 0.4	000			DOGUMENT ID				0.4	.,		received, assigned by the Department of Public
ED 01	303	Document ID	ENV	DOCUMENT_ID	9	N	Document ID Number	C1	Yes	No	Safety to uniquely identify the collision report.
											Used by the Depar tment of Public Safety in the event a report is revised and an ew Document
ED 02	304	Previous Document ID	ENV	PREV DOCOUMENT ID	9	N	Document ID Number	No	No	No	ID is assigned.
					-		1 - Sunday				15 To doo ignod.
							2 - Monday				
							3 - Tuesday				
							4 - Wednesday				
							5 - Thursday				
ED04	305	Day of Week	ENV	DAY OF WEEK CDE	1	N	6 - Friday 7 - Saturday	CD9	Yes	No	The day of the week on which the collision occurred.
LDOT	303	Day of Week	LIVV	DAT_OF_WEEK_OBE		- 14	1 - Property-Damage Only	000	103	140	occurred.
							2 - Possibl e Injury				
							3 - Non-Incap acit ating Injury				The seve rity of a col lision based on the most
							4 - Incap acit ating Injury				sever einjury to any pers on involved in the
ED 05	306	Collision Severity	ENV	COLL_SEVERITY_CDE	1	N	5 - Fatal Injury	CD1	Yes	Yes	collision.
							1 - Rural US Highway				
							2 - Interstate Highway				
							3 - Interstate Turnpike				
							4 - Rural State Highway 5 - County Road				
							6 - City Street				
							7 - Urban US Highway				Identifies the class of roadway on which the
							8 - Urban State Highway				collision oc curred.
ED 06	307	Highway Class	ENV	HIGHWAY_CLASS_CDE	2	N	9 - Non-Interstate Turnpike	No	No	No	From ODOT.
1											Indicates if a school bus or motor vehicle
LD03	200	Cabaal Bua Dalatad	ENIV/	CCUCOL BUC CDE		N	N - No	010	V	V	functioning as a school bus for a school -related
ED 07	308	School Bus-Related	ENV	SCHOOL_BUS_CDE	1	N	Y - Yes	C18	Yes	Yes	pur pose i s involved in the col lision.
1											Count of occupants of motor vehicles in transport in the collision. Derived by counting
											the number of motorists (drivers and
		Number of Occupants (for									passengers) in the collision as indicated in
ED 10		Collision)	ENV	TOT_OCCUPANTS_NUM	3	N	Number of occupants	CD3	Yes	No	occupant's motor vehicle unit number.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
ED11	310	Number of Non Meteriote	ENV	TOT NONMOTRIST NUM	2	N	Number of non-motorists	CD4	Yes	Yes	count of non- occup ants (pedest rians, pedal cyclists, etc.) or occupa nts of motor vehicles not in transpor tinvolved in the collision.
EDII	310	Number of Non-Motorists	EINV	TOT_NONMOTRIST_NOM	2	IN	N - No	CD4	res	res	At least one driver or non-motorist involved the collision had an alcohol related condition .
ED 12	311	Alcohol Involvement	ENV	ALCOHOL_INVOLV_CDE	1	Α	Y - Yes - When Driver/Pedestrian Condition = 2 or 3 and Cause = 80 N - No	CD7	Yes	Yes	Includes both alcohol use under the legal limit and at or over the legal limit.
ED 13	312	Drug Involvement	ENV	DRUG_INVOLV_CDE	1	Α	Y - Yes - When Driver/Pedestrian Condition = 4 and Cause = 81	CD8	Yes	Yes	At least one driver or non-motorist involved in the collision a drug related cond ition.
ED 14	313	Number of Commercial Vehicle	ENV	TOT_COMM_VEH_NUM	2	N	Number of commercial vehicles	No	No	Yes	Number of commercial vehicles involved in the collision.
ED 17	314	Reporting Agency	ENV	REPORT_AGENCY_CDE	1	N	1 - OHP 2 - City Police 3 - Sheriff Department 4 - Game/Park Ranger 5 - Campus Pol ice 6 - Tribal Police 7 - Other	C9	Yes	No	To be derived from batch or transmission ID or may be entered by data en try.
ED41	315	Manner of Collision Impact	ENV	MANNER COLL CDE	2	N	0 - Not Stated 1 - Not Collision Between Two Motor Vehicles in Transport 2 - Rear End (front-to-rear) 3 - Head-On (front-to-front) 4 - Angl e (front-to-side) Sam e Direction 5 - Angl e (front-to-side) Opposite Direction 6 - Angl e (front-to-side) Right Angl e (includes broadside) 7 - Angl e-Direction Not Specified 8 - Sideswipe, Sam e Direction 9 - Sideswipe, Opposite Direction 10 - Rear-to-Re ar 12 - Other 99 - Unknown	C8	Yes	No	The identification of the manner in which two motor vehicles in transport initially came toget her without regard to the direction of force. This data element refers only to the collisions where the first harmful event involves a collision between two motor vehicles in transport. ODOT CAN D ERIVE THE ELE MENT.
ED42		Relation to Junction	ENV	REL_JUNCTION_CDE	2	N	1 - Non-Jun ction Junct ion Non- Interchang e Area 21 - Intersection 22 - Intersection-Related 23 - Entrance/Exit Ramp 24 - Railway Grade Crossing 25 - Crosso ver-Re lated 26 - Driveway, Alley-Access-Related 27 - Other Non-Interchange (Crossing for Bikes, Snowmobile, School, etc.) 28 - Unknown Non-I nterchang e Junct ion Interchange Area: 31 - Thru Roadway 32 - Intersection 33 - Intersection-Related 34 - Entrance/Exit Ramp 35 - Other Part of Interchange 36 - Unknown Interchange 99 - Unknown Junction	C16	Yes	No	The location of the first harmful event in relation to a junction. ODOT CAN DERIVE THIS ELE MENT.
ED	317	Number of Contact Vehicles	ENV	CONTACT_VEHL_NUM	2	N	Number of contact vehicles	No	No	No	Num ber of vehicles that made c ontact during the collision.
ED		Number of Non- Contact Vehicles	ENV	NONCONTACT_VEH_NUM	2	Ν	Number of non-contact vehicles	No	No	No	Number of vehicles directly involved in the collision, but did not make contact with and other vehicle, person or object.

By Field on Form

Num	Field	Name of Element	DB2	DB2 Column Name	Length	Type	Code & Attribute	MMUCC	MMUCC	CMV	Definition
	On Form		Table					Code	Com pliant		
							0 - Not Applicable				
							1 - Not Transported				
							2 - EMS				Type and identity of unit providing
							3 - Law Enforcement				transportation tothe medical facility receiving
							4 - Private Vehicle				the patient.
		Transported to Medical Facility					5 - Other				Derived by Data Entry from TRANSPORTED
PD 14	319	Ву	PER	TRANS_MED_BY_CDE	1	N	9 - Unknown	P28	Yes	No	BY.
							N - No				Person is the Vehicle Owner. Fields 96 thru
PD	320	Vehicle Owner Code	PER	VEHICLE_OWNER_CDE	1	Α	Y - Yes	No	No	No	103.
							N - No				
PD	321	Driver Code	PER	DRIVER_CDE	1	Α	Y - Yes	No	No	No	Person is the Vehicle Driver. Fields 44 thru 78.
											The degree that acc ess to ab utting land is fully,
											partially or not controlled by a public authority.
											Full acce ss control provides access only at
							1 - Full Access Control				interchanges (interstate, etc.). Partial access
							2 - Part ial Access Contr ol				control provides no private access. No access
VD	322	Access Control	UNT	ACCESS_CONTROL_CDE	1	N	3 - No Access Control	RL9	Yes	No	control permits private access (driveway, etc.).
ED	323	Special Feature - ODOT	ENV	SPECIAL_FEAT1_CDE	2	N		No	No	No	To be provided by ODOT.
ED	324	Special Feature - ODOT	ENV	SPECIAL_FEAT2_CDE	2	N		No	No	No	To be provided by ODOT.